



# Iowa Department of Human Services

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## INFORMATIONAL LETTER NO.1586-MC

**DATE:** December 11, 2015

**TO:** Iowa Medicaid Hospitals, Physicians, Certified Nurse Midwives, Advanced Registered Nurse Practitioners, Federally Qualified Health Clinics, Rural Health Clinics, Clinical Social Workers, Behavioral Health Providers, Behavioral Health Intervention Services Providers, Habilitation Providers, Psychiatric Medical Institutions for Children (PMIC)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Behavioral Health and Substance Abuse Services

**EFFECTIVE:** January 1, 2016

The Iowa Plan will end on December 31, 2015. Magellan will continue to administer the Iowa Plan through that date. Effective for dates of service on or after January 1, 2016, the IME and the Managed Care Organizations will be responsible for coverage of mental health and substance abuse services.

The payer on file for the date of service (IME or Magellan) will be responsible for claim adjudication for all services rendered on dates of service on or prior to December 31, 2015.

All services rendered on January 1, 2016, and after will become the responsibility of the applicable MCO or the IME depending on member eligibility. The IME will be following the Iowa Plan reimbursement schedule established by Magellan and the reimbursement schedule has been shared with each of the MCOs. The rates, fees, and list of covered services can be found on the DHS [Fee Schedule](#)<sup>1</sup> web page.

### **IME Behavioral Health Claims for Dates of Service On or After January 1, 2016:**

When billing the IME for services, the appropriate credentialing modifier must be used to reflect which specialty is providing the services, just as was the case when billing these services to Magellan under the Iowa Plan. If the claim is billed without a credentialing modifier the claim will be denied.

Below is the list of credentialing modifiers:

- AF – Specialty Physician
- HO – Master's Degree Level
- HP – Doctoral Level
- SA – Advanced Registered Nurse Practitioner (ARNP)

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<sup>1</sup> <http://dhs.iowa.gov/ime/providers/csrp/fee-schedule>

- TD – Registered Nurse (RN)
- TF – Intermediate Level of Care/RN
- TG – Complex/High Tech Level of Care
- U1 – Medicaid Care Level 1, as defined by each state
- U2 – Medicaid Care Level 2, as defined by each state
- U3 – Medicaid Care Level 3, as defined by each state

Providers not currently enrolled with Iowa Medicaid will need to enroll to be reimbursed for services rendered. For more information on becoming an Iowa Medicaid enrolled provider please visit the DHS [Provider Enrollment](#)<sup>2</sup> web page for forms and credentialing requirements. A document providing direction on [how to enroll](#)<sup>3</sup> as an Iowa Medicaid provider is also available on the DHS website.

PMIC services will require a level of care determination. Facilities must request a PMIC level of care authorization by contacting the IME Medical Services Unit at 888-424-2070 or locally in Des Moines at 256-4624, emailing [PMIC2@dhs.state.ia.us](mailto:PMIC2@dhs.state.ia.us), or by faxing the request to 515-725-0931. The [Certification of Need for Inpatient Psychiatric Services](#)<sup>4</sup> can be used to provide certification of the need for care in accordance with Iowa Administrative Code 85.22(3).

The information needed for admission includes member's symptoms, DSM-V diagnosis, lower level treatment that has been unsuccessful, level of stability and discharge plan. For continued treatment authorizations the information needed will include the member's continued or new symptoms and behaviors requiring 24-hour care, DSM-V diagnosis, likelihood of benefit from active intervention, member's progress toward goals and discharge planning activities.

The IME appreciates your continued partnership as we work to continuously improve the claim processing service quality and accuracy. If you have questions, please contact the IME Provider Services Unit at 1-800-338-7909 or email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).

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<sup>2</sup> <https://dhs.iowa.gov/ime/providers/enrollment>

<sup>3</sup> [https://dhs.iowa.gov/sites/default/files/How\\_to\\_Enroll\\_as\\_an\\_IME\\_Provider\\_0.pdf](https://dhs.iowa.gov/sites/default/files/How_to_Enroll_as_an_IME_Provider_0.pdf)

<sup>4</sup> <http://dhs.iowa.gov/sites/default/files/470-2780.DOC>